



920476-904881

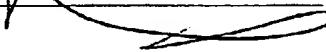
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the application of : S D Brueckheimer
Serial No. : 09/751,060
Filed : December 29, 2000
For : Network Planning Tool
Examiner : D R Vincent
Art Unit : 2661
Customer number : 23644

RECEIVED

JUN 25 2004

Technology Center 2600

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450," on June 14, 2004
Name of person signing: Jennifer J. Ramirez
Signature: 

RESPONSE TO RESTRICTION REQUIREMENT MAILED MAY 12TH 2004

Honorable Director of Patents and Trademarks
PO Box 1450
Alexandria VA 22313-1450

Dear Sir,

In response to the requirement for restriction mailed May 12 2004, the applicants
remark as follows:

16/21/2004 HDMESS1 00000001 09751060

1 FC:1203 290.00 OP

08/06/2004 MLAWSON 00000001 120913 09751060

01 FC:1202 234.00 DA

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09757060

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS			
FOR	NUMBER FILED	NUMBER EXTRA	
TOTAL CHARGEABLE CLAIMS	26 minus 20 =	- 6	
INDEPENDENT CLAIMS	4 minus 3 =	- 1	
MULTIPLE DEPENDENT CLAIM PRESENT			<input type="checkbox"/>

SMALL ENTITY
TYPE

OTHER THAN
OR SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	355.00	BASIC FEE	710.00
X\$ 9=		X\$18=	188
X40=		X80=	80
+135=		+270=	
TOTAL		TOTAL	898

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
	39	Minus	26	13
Independent	3	Minus	4	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input checked="" type="checkbox"/>	

SMALL ENTITY OR OTHER THAN
OR SMALL ENTITY

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		X\$18=	234
X40=		X80=	80
+135=		+270=	
TOTAL ADDITIONAL FEE		TOTAL ADDITIONAL FEE	314

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
Independent		Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>	

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		X\$18=	
X40=		X80=	
+135=		+270=	
TOTAL ADDITIONAL FEE		TOTAL ADDITIONAL FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
Independent		Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>	

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		X\$18=	
X40=		X80=	
+135=		+270=	
TOTAL ADDITIONAL FEE		TOTAL ADDITIONAL FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.